PAYENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

		CLAIN	AS A		PART	(Column 2)				SMALL ENTITY TYPE		7	OR.	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS				(country)					RATE	FEI		ſ	RATE	FEE		
FOR				HUMBER FILED		KUMBER EXTRA				BASIC FEE		\exists	OR	BASIC FEE	750	
TOTAL CHARGEABLE CLAIMS				<i>H</i> minus 20 =		•				X\$9=		\Box	OR	X \$ 18 =		
INDEPENDENT CLAIMS				1	, minus 3 =	•				X\$44=		\Box	OR	X \$ 88 =		
XULTIPLE DEPENDENT CLAUM PI				RESENT						+ \$ 150 =		<u></u>	OR	+ \$ 300 =		
· If	he difference	in colum	n 1 is	less than zero, enter "O" in column 2						TOTAL		J٠	OR	TOTAL	450	
(Column 1)				AMENDED - PART II (Cotumn 2) (Cotumn 3)						SMALL ENTITY			OR .	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIM REMAIN AFTE AMENDA	DKG R		PREV	HEST ABER COUSLY FOR	PRESI			RATE	ADC TION FE	AL		RATE	ADDI- TIONAL FEE	
	Total	. 4	9	Minus	. 6	20				X\$9=	1		OR	X\$18 =		
	Independent	•		Minus	***	3				X \$ 44 =		\Box	OR	X \$ 88 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]		+ \$ 150 =	<u>'</u>		OR	+ \$ 300 =		
1/1/0/0									•	YOYAL ADOIT. FEE			OR	YOYAL ADOIT, FEE		
/// / (Cotumn 1) (Cotumn 2) (Cotumn 3)																
AMENDMENT 6	1	REMAD	ING R		PREV	WEER NOUSLY O FOR	PRES			RAȚE	TION FE	AL		RATE	ADDI- TIONAL FEE	
	Total	1/6		Minus	" (20	.0			X \$ 9 =		4	OR	X\$18=		
	Independent	• /		Minus		3	-0			X \$ 44 =	/		OR	X\$88-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									• \$ 150 p	1_	'	OR	+ \$ 300 =		
										TOTAL ADDIT. PER			OR	ADDIT, FEE		
(Column 1) (Column 2) (Column 3)														400		
AMENDATENT C	6/4/07	REMAD AFTE AMENDS	ING R		PREV	MBER TOUSLY D FOR	PRES EXT			RATE	ADI TIOI FE	IAL		RATE	ADDI- TIONAL FEE	
	Total ·	• 1	Ò	Minus	• 0	20	9	1		X\$9=		4	OR	X \$ 18 =		
	Independent	• (Minus	•••	3	•	Ш		X \$ 44 =	<u></u>	Ц	OR	X \$ 88 7		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	7		+ \$ 150 =			OR	+ \$ 300 =	·	
										ADDIT, FEE	<i>الـــا</i>		OR	ADDYT. FEE	L	
•	If the entry in color If the "Highest Mi If the "Highest Mi The "Highest Mi	umber Prev	lously i	Paid For IN 1	NGS SPACE I NGS SPACE I	o bosa Dub n bena dua	n 27, ente n 31, ente	T .	and ir	the appropria	نا مونا وار	n potune	n 1.			

FORM PTO-675 (Raw, 11/2004)

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